

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SEARCH NO. 10 | 589040
FILING DATE
APPLICATION

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1							51			
2					1					52			
3						1				53			
4							1			54			
5								1		55			
6									1	56			
7										57			
8										58			
9										59			
10										60			
11										61			
12										62			
13										63			
14					1					64			
15						1				65			
16							1			66			
17								1		67			
18									1	--68--			
19										69			
20										70			
21										71			
22										72			
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42										92			
43										93			
44										94			
45										95			
46										96			
47										97			
48										98			
49										99			
50										100			
TOTAL 0.00													
TOTAL DEP.													
TOTAL CLAIMS													